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**FACSIMILE TRANSMISSION COVER PAGE**

DATE: July 9, 2008  
RECIPIENT: RORI E. BURCH -- OPAP  
COMPANY: USPTO  
RECIPIENT'S FAX NO: 1-571-273-8300  
RECIPIENT'S PHONE NO: 1-703-308-9010, Ext. 135  
FROM: Christine J. Graff  
FILE NUMBER: U.S. Serial No. 10/718,430 Filed 11/20/2003  
(Attorney Docket: SEAG-63413)  
NUMBER OF PAGES  
(including cover page): 3  
MESSAGE:

An Executed Transmittal Form and Request for Withdrawal As Attorney or Agent and Change of Correspondence Address are attached.

SENT BY: Christine J. Graff

DIRECT DIAL NUMBER: 412-263-4371

Original will follow via:  
Original will not follow.

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PTO/SB/21 (04-07)

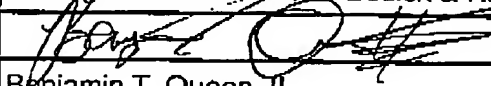
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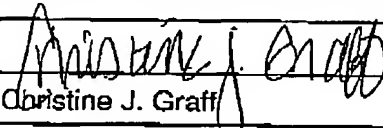
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/718,430
	Filing Date	11/20/2003
	First Named Inventor	Ganping Ju
	Art Unit	2627
	Examiner Name	Allen J. Heinz
Total Number of Pages In This Submission	Attorney Docket Number	SEAG-63413

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (PTO/SB/83)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Pietragallo Gordon Alfano Bosick & Raspanti, LLP	
Signature		
Printed name	Benjamin T. Queen, II	
Date	July 9, 2008	Reg. No. 41,260

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Christine J. Graff	Date July 9, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/718,430
Filing Date	11/20/2003
First Named Inventor	Ganping Ju
Art Unit	2627
Examiner Name	Allen J. Heinz
Attorney Docket Number	SEAG-63413

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

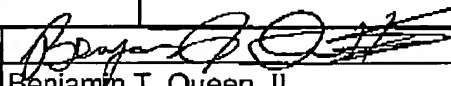
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Instructed by Assignee of Record, Seagate Technology LLC

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
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Address			
City	State	Zip	
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Telephone	Email		
Signature			
Name	Benjamin T. Queen, II	Registration No.	41,260
Date	July 9, 2008	Telephone No.	412-263-4360

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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